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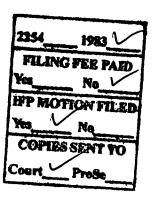
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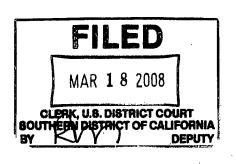
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UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF CALIFORNIA

SCOTT BERNARD LUK

'08 CV 0504 JAH AMB

REQUEST FOR APPOINTMENT OF COUNSEL UNDER THE CIVIL RIGHTS ACT OF 1964, 42 U.S.C. 2000e 5(f)(1); DECLARATION IN SUPPORT OF REQUEST

Shell GAS Corporation

- 1. I, the plaintiff in the above-entitled employment discrimination action, request that the court appoint an attorney to represent me in this matter. In support of this request, I state as follows:
 - A. my claim is meritorious (that is, I have a good case), and
 - B. I have made a reasonably diligent effort to obtain counsel, and
- C. I am unable to find an attorney willing to represent me on terms that I can afford.
- 2. A copy of the Notice-of-Right-to-Sue-Letter I received from the Equal Opportunity Commission is attached to the complaint which accompanies this request for counsel.
- 3. A. Does the Notice-of-Right-to-Sue-Letter show that the Commission found "no reasonable cause" to believe the allegations made in your charge were true?

27 Yes <u>V</u> N

28

1	IF YOUR ANSWER IS "YES," YOU MUST ATTACH A COPY OF THE
2	COMMISSION'S INVESTIGATIVE FILE TO THIS REQUEST AND ANSWER QUESTIONS B
3	AND C.
4	B. Do you question the correctness of the Commission's "no reasonable cause"
5	determination?
6	YesNo
7	C. If you answered "yes" to question 3B, what are your reasons for questioning the
8	Commission's determination? Be specific and support your objections with fact. Do not simply
9	repeat the allegations made in your complaint; the court will review your complaint in considering this
10	request for counsel.
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27	
28	(Attach additional sheets as needed)
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2	4. Have you talked with any attorney about handling your claim? Yes No
,	If "YES," give the following information about <u>each</u> attorney with whom you talked:
۱	Attorney:
5	When:
	Where:
	How (by telephone, in person, etc.):
	Why attorney was not employed to handle your claim:
١	
	Attorney:
	When:
	Where:
	How (by telephone, in person, etc.):
	Why attorney was not employed to handle your claim:
	Attorney:
	When:
	Where:
	How (by telephone, in person, etc.):
١.	Why attorney was not employed to handle your claim:
5	
,	
7	

1	5. Explain any other efforts you have made to contact an attorney to handle your claim:
2	CALLED SEVERAL PERSONAL INJURY ATTYS COLLECT NO
3	responce Also SEVERAL LETTERS with NO responce.
4	TES PONCE 19150 SELLIA 1211 LIS WITH 12 TESPONS
5	
6	6. Give any other information which supports your application for the court to appoint an
7	attorney for you: CONENTY in COUNTY jail, AND UNEMPLOYED I HAVE NO
8	Source of IN come what so Ever.
9	
0	
1	
2	7. Give the name and address of each attorney who has represented you in the last 10 years
3	for any purpose: Richard Thomas - Vista Calif Public delender's Office S.D. Calif
4	PUBLIC DETENDERS OFFICE CITY
5	
6	
7	
8	
9	(Attach additional sheets as needed)
0	8. I cannot afford to obtain a private attorney. The details of my financial situation are listed
.1	below:
22	A. <u>Employment</u>
23	Are you employed now? yes no am self-employed
24	Name and address of employer:
25	
26	
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ا ۱	

1	If employed, how much do you earn per month?					
2	If not employed, give month and year of last employment: Oct 200/					
3	4 4 00 00					
4	If married, is your spouse employed? yes no					
5	If "YES," how much does your spouse earn per month?					
6	If you are a minor under age 21, what is your parents' or guardians' approximate monthly					
7	income?					
8						
9	B. Assets Ø					
10	(i) Other Income					
1	Have you received within the past 12 months any income from a business, profession or other					
12	form of self-employment, or in the form of rent payments, interest, dividends, retirement of annuity					
13	payments or other sources? yes no					
14						
15	\$ Received Source					
16						
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25						
26						
27						
28	(Attach additional sheets as necessary)					
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(ii) <u>Cash</u>	Ø
Have you any cash on hand or	r money in savings or checking accounts? yes no
If "YES," state total a	mount:
(iii) <u>Propert</u>	<u>ty</u>
Do you own any real estate, s	stocks, bonds, notes, automobiles, or other valuable property
excluding ordinary household furnish	hings and clothing)? yes no
If "YES," give value and desc	cribe it:
<u>Value</u>	<u>Description</u>
C. Obligations an	id Debts (UNKNOWN) totAl
C. <u>Obligations an</u> (i) <u>Depend</u>	~ /
(i) <u>Depend</u>	~ /
(i) <u>Depend</u>	dents Ø ngle married widowed, separated or divorced.
(i) <u>Depend</u> Your marital state is: <u></u> sin Your total number of dependent	dents Ø ngle married widowed, separated or divorced.
(i) <u>Depend</u> Your marital state is: <u></u> sin Your total number of dependent	dents Ø ngle married widowed, separated or divorced. ents is :
Your marital state is: sin Your total number of dependent List those person you actually	dents Ø ngle married widowed, separated or divorced. ents is :
(i) Dependence Your marital state is: ✓ single Your total number of dependence List those person you actually contribution to their support:	dents Ø ngle married widowed, separated or divorced. ents is: y support, your relationship to them, and your monthly
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1	(ii) Debts and Monthly Bills
2	List all creditors, including banks, loan companies and charge accounts, etc.
3	UNKNOWN Creditor - UNKNOWN - Total Debt UNKNOWN Monthly Payment
4	Rent:
5	Mortgage Ø
6	on Home:
7	Others:
8	
9	
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11	
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14	OWE LO
15	9. Signature July July
16	I declare under penalty of perjury that the above is true and correct.
17	3-7-08
18	Dated:
19	
20	Signature
21	(Notarization is not required)
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23 24	
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